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Bib Data Sheet

CONFIRMATION NO. 8168

<b>SERIAL NUMBER</b> 09/902,447	<b>FILING DATE</b> 07/10/2001 <b>RULE</b>	<b>CLASS</b> 362	<b>GROUP ART UNIT</b> 2875	<b>ATTORNEY DOCKET NO.</b> TI-30208
<b>APPLICANTS</b> Ariel Yagil, Ramat Hasharon, ISRAEL; Ofir Shalvi, Herzlia, ISRAEL;				
<b>** CONTINUING DATA *****</b> THIS APPLN CLAIMS BENEFIT OF 60/216,997 07/10/2000				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 08/28/2001</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	<b>STATE OR COUNTRY</b> ISRAEL	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 1
<b>INDEPENDENT CLAIMS</b> 1				
<b>ADDRESS</b> 23494				
<b>TITLE</b> Upstream hi-phy lite system				
<b>FILING FEE RECEIVED</b> 870	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	